

June 30, 1998

**AUTOMATED SAFETY INCIDENT SURVEILLANCE AND TRACKING
SYSTEM (ASISTS) WITH NEEDLE STICK TRACKING MODULE**

1. PURPOSE: This Veterans Health Administration (VHA) Directive provides policy and guidance on the tracking and monitoring of occupational safety and health (OSH) incidents by an Automated Safety Incident Surveillance and Tracking System (ASISTS) with Needle Stick Tracking Module. Implementation of ASISTS will be via the Veterans Health Information Systems Technology Architecture (VISTA) software, Version 1.0.

2 BACKGROUND

a. Improving VHA's tracking and management of employee accidents, in general, and exposures to bloodborne pathogens from needle sticks and sharps, in particular, is a high priority. The Under Secretary for Health has assigned overall responsibility for this matter to the newly created Strategic Health Group for Environmental and Occupational Health.

b. In conjunction with this Directive, the Under Secretary for Health has approved the development and implementation of ASISTS to track such incidents as well as better manage accidents at each VHA facility. To the extent permitted by the Privacy Act, this software provides for the appropriate, secure access to employees, employee representatives, supervisors, Employee Health Offices, Clinicians, Safety Offices, Facilities' Engineering Offices, and Human Resources Offices as well as top Department of Veterans Affairs (VA) medical center and Veterans Integrated Service Network (VISN) management.

c. ASISTS provides required documentation including VA Form 2162, Report of Accident, and Log of Federal Occupational Inquiries and Illnesses. It will produce both the Office of Worker's Compensation Programs Form C.A.-1, Instructions for Completing Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation, and the Office of Worker's Compensation Programs Form C.A.-2, Federal Employee's Notice of Occupational Disease and Claim for Compensation. Automation of these key OSH processes coupled with the tracking capabilities provided by this software, requires all those involved in accident prevention, tracking, analysis, and management to work as a team with those who provide medical treatment at the VA medical center and those involved with workers' compensation. Each menu will contain the necessary security to protect confidentiality of the data collected.

d. When fully implemented at each VA medical center, ASISTS will provide the basis to significantly improve accident management and associated compensation expenditures, which currently cost about \$140 million annually.

e. Analysis of the data gathered by this software will assist in preventing future accidents by identifying trends and prevention programs.

f. Improved accident and illness prevention will improve employee wellness and advance VA as an employer of choice.

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g. The ASISTS software also contains capabilities to specifically track incidents involving needle sticks, sharps and other exposures. A national database to aggregate information collected at each VA medical center is currently being designed. The data collected will assist each VA medical center to more accurately track and follow up on these incidents until this data are collected and analyzed for national trends. Once the national database for tracking exposures to bloodborne pathogens is operational, there will be clearer identification of system-wide problems, opportunities for focused education, and conducting research in this important area of occupational medicine.

h. This national database will be activated in a future phase of this initiative. Future plans for this next phase should include a comprehensive employee health module to provide extensive software capabilities for tracking and following numerous critical health issues. Similarly it should also include much more extensive accident tracking and analysis tools. These additional capabilities will be largely based upon feed back obtained from VA medical center staffs' actual experience with this version of ASISTS.

i. An additional future phase should provide the capability for electronic transmission of C.A.-1 and C.A.-2 forms to the Department of Labor. It is planned that such electronic submission will interface with the existing Workers' Compensation (WC)-OSH Tracker system. This will save significant amounts of time for VA medical center staff who now process these forms manually. In this future phase, it is important to address employee notification of receipt of forms and providing an identifier to the employee to allow checking status of a claim.

3. POLICY: All VHA facilities shall implement ASISTS with Needle Stick Tracking Module upon delivery as a mandatory part of the VISTA system. Software shall be implemented within 30 days of receipt at each facility.

4. ACTION: Each VHA Facility Director shall appoint a multidisciplinary team to review existing accident reporting, tracking and monitoring processes to determine the best method to implement ASISTS according to actual working conditions at the VA medical center.

a. The team should consist of representatives from senior VA medical center management, Employee Health, Safety Office, Infectious Diseases, Facilities and/or Engineering, Environmental Management Service, Human Resources and the Union. The number of union representatives on the team shall be the result of mutual agreement between union and management.

b. Since successful management of accident prevention requires teamwork and cooperation among all involved in the accident tracking and management process, it is critical that team members coordinate their activities and review existing accident management and tracking processes. Work procedures and use of the software require close coordination to ensure maximum benefit and potential cost reductions achievable with this software.

c. Instructions for transmitting bloodborne pathogen exposure data to the national database will be provided at a later date. In the interim, this data must be maintained at each facility.

5. REFERENCES: None.

6. FOLLOW-UP RESPONSIBILITY: The Strategic Health Group for Environmental and Occupational Health (13) is responsible for the contents of this Directive. The point of contact for clinical issues is Frances Murphy, M.D. at (202) 273-8580 and the point of contact for technical questions is Arnold B. Bierenbaum at (202) 273-5844.

7. RESCISSION: This VHA Directive expires June 30, 2003.

S/ Robyn Nishimi, Ph.D. for
Kenneth W. Kizer, M.D., M.P.H.
Under Secretary for Health

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